



CHAUTAUQUA COUNTY SHERIFF'S OFFICE GENERAL ORDER

BY ORDER OF: Sheriff Joseph A. Gerace	EFFECTIVE DATE: 11/23/2012	CORRECTIONS: 700.30
	SECTION: Medical	
REPLACES:	TOPIC: Receiving Screening	

700.30: Receiving Screening

Policy: **A Receiving Screening is performed by qualified Correctional Staff on all inmates, including transfers, immediately upon their arrival at the facility.**

Purpose: **To determine a need for special medical assistance or possible transfer.**

Standards:

ACA Adult Local Detention Facilities 3rd Edition (3-ALDF)

4E-19

New York State Commission of Correction – Minimum Standards

7010.01, 7010.02

New York State Sheriff's Association

Standard 136

National Commission on Correctional Health Care

J- E-02

Procedures:

700.30.01: Emergency Care

1. Persons who are unconscious, semi-conscious, bleeding, mentally unstable or otherwise urgently in need of medical attention will be sent to Westfield Memorial Hospital for emergency care

2. If referred to the hospital, their admission or return to the facility requires that they have written medical clearance.

700.30.02: Receiving Screening

1. The Receiving Screening findings are recorded on a printed form, which has been approved by the responsible physician and performed immediately for all inmates.
2. At a minimum, the Receiving Screening will include the following:
 - a. Inquiry into current and past illnesses, health problems, and conditions concerning venereal disease
 - i. Any past or present history of tuberculosis or other infectious or communicable diseases, hospitalizations, treatment of symptoms suggestive of illness (e.g. weight loss, loss of appetite, fever, night sweats)
 - ii. Mental health, including suicidal ideation
 - iii. Dental problems
 - iv. Allergies
 - v. Medications taken and special health (including dietary) requirements
 - vi. For females, date of last menstrual period, current gynecological problems or pregnancy
 - vii. Other health problems designated by the responsible medical provider
3. Observation of the following:
 - a. Behavior which includes state of consciousness, mental status (including suicidal ideation), appearance, conduct, tremors and sweating
 - b. Body deformities and ease of movement
 - c. Persistent cough or lethargy
 - d. Conditions of the skin, including trauma marks, bruises, lesions, jaundice, rashes, infestations, needle marks or other indications of drug abuse
 - e. Disposition of the inmate, such as immediate referral to an appropriate health care service, placement in the general population with later referral, or placement with no referral needed.
 - f. Documentation of the date and time when the referral is actually made.
 - g. All inmates are verbally informed of how to access health services.
 - h. If the inmate has been previously incarcerated, the prior health record should be obtained and reactivated by the nursing staff as soon as she receives the receiving screening.

- i. Notation of the disposition of the patient, such as immediate referral to an appropriate health care service, placement in the general inmate population and later referral to an appropriate health care service, or replacement in the general inmate population will be observed.
- j. Receiving screening forms are to have the date and time recorded immediately upon completion and includes the signature and title of the person completing the receiving screening form.
- k. Immediate health needs are identified and addressed and potentially infectious inmates are isolated.